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November 2, 2005

TO: Each Supervisor

FROM: Thomas L. Garthwaite, M.D.

Director and Chief Medical Officer

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Director of Public Health and Health Officer

SUBJECT: UPDATE ON MRSA

On February 11, 2003, your Board asked the Department of Health Services to provide regular updates on methicillin-resistant *Staphylococcus aureus* (MRSA) in the County Jail. In June 2003, your Board asked us to investigate MRSA in the County Probation (Juvenile) facilities and report back to the Board. This is an update to our report on August 8, 2005.

MRSA AT THE LOS ANGELES COUNTY SHERIFF'S FACILITIES

A total of 970 cases of MRSA were identified in the third quarter of 2005, including 303 cases in June, 352 cases in August and 313 (preliminary) cases in September. The increase in cases in July and August is consistent with a seasonal increase in MRSA cases previously seen at the Jail and in other national studies. A total of 2,041 cases have been identified through September 2005 versus 1,671 cases identified in the same time period in 2004. During this same time period the average daily inmate population has also been increasing. The percentage of cases identified within 5 days of admission (presumed to be acquired in the community) has increased to 33% in the first 8 months of 2005 versus 21% in the same time period in 2004; the percentage of cases identified >15 days after admission (presumed to be acquired within the Jail) has decreased from 54% to 41% in the same time period. In both May and August of 2005, the number of cases coming in from the community equaled or exceeded the number of cases acquired in the Jail.

There continues to be a difference in the epidemiology of MRSA by gender. In the first eight months of 2005, 49% of the cases in female inmates were identified in the first five days after admission versus 29% of the cases in male inmates.

Gloria Molina First District

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The bi-monthly MRSA Department of Health Services (DHS) Jail Task Force meeting took place in August and October 2005. Progress has been made in identifying inmates with MRSA and providing them specialized wound care. However, according to the reports at the meetings, inmates are not receiving their full allotment of garments as recommended under the MRSA guidelines drafted by DHS. Staff from the Sheriff's Department attribute this to the lack of resources allocated to the laundry.

Public Health staff joined Sheriff's Department staff to evaluate the health education material on MRSA used at the Jail. Inmates largely responded positively to the current material (including posters and information sheets). Based on the feedback from the inmates, Public Health is developing a new information sheet (English and Spanish) to be given to all inmates who have been identified with MRSA with recommendations on how to prevent the spread to family members and with resources for medical follow-up after discharge from the Jail.

The Sheriff's Department has hired a fulltime Epidemiologist and several Public Health Nurses dedicated to MRSA and other diseases of public health significance. With the addition of these personnel, we are requesting that the Jail Epidemiology Unit take primary responsibility for data management, analysis, and continue submission of these reports. Staff from Public Health would continue to attend the bi-monthly Task Force meetings, be available for consultations, and make recommendations on an as needed basis.

MRSA IN THE LOS ANGELES COUNTY PROBATION FACILITIES

Since April 2003, 211 cases of MRSA have been reported from the Probation Department facilities (juveniles) including 67 in 2005. Of the cases in 2005, there have been 42 reported in boys and 25 reported in girls. Of the 67 cases, 30 (45%) were identified within five days of admission to a Probation facility (probably community acquired) and 28 (42%) were identified more than 15 days after admission to Probation (probably acquired during detention). Ongoing surveillance of the cases in Probation facilities will be handled by the medical staff there, who will provide us with the totals each month and consult with us if the trend changes. We stand ready to continue to provide technical assistance to them.

MRSA IN THE COMMUNITY

Public Health staff recently co-authored an article on MRSA which will be printed in the California Medical Board Action Report which is distributed to all physicians licensed by the state of California. This should help educate physicians about the diagnosis and treatment of MRSA in the community.

If you have any questions or need more information, please let either of us know.

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c: Chief Administrative Officer
Chief Probation Officer
County Counsel
Executive Officer, Board of Supervisors
Sheriff